

OVERVIEW OF KNOWLEDGE OF PREGNANT WOMEN IN THE 3rd TRIMESTER ABOUT IMD (EARLY INITIATION OF BREASTFEEDING)

Dewi Yuliasari¹, Ike Ate Yuviska²

DIII Midwifery, Faculty of Health Sciences, Malahayati University
E-mail : dewiyuliasari@malahayati.ac.id

ABSTRAK : TINJAUAN PENGETAHUAN IBU HAMIL TRIMESTER 3 TENTANG IMD (INISIASI MENYUSUI DINI)

Latar Belakang: Rendahnya pengetahuan ibu tentang IMD, tingkat pendidikan ibu, dukungan tenaga kesehatan dan keluarga, konseling menyusui yang belum berjalan dengan baik, metode persalinan, dan tempat persalinan merupakan beberapa faktor yang menghambat pelaksanaan IMD (Sinaga & Siregar, 2020) (Novianti, Mujiati, 2019) (Swandy. dkk., 2019). Hasil penelitian Lestariningsih (2016) di ruang bersalin menemukan bahwa tidak semua pasien mendapat informasi dari petugas kesehatan tentang IMD sebelum melahirkan. Konseling yang diberikan oleh petugas kesehatan kepada pasien inpartu biasanya dilihat pertama kali pada kondisi ibu yang akan melahirkan, jika masih kooperatif maka konseling pertama yang diberikan adalah tentang proses persalinan atau teknik mengejan (Lestariningsih, 2016). Penelitian Damayanti (2016) menemukan bahwa pelaksanaan IMD belum maksimal, masih 60% dilakukan oleh seluruh bidan (Damayanti, 2016).

Tujuan: Mengetahui Pengetahuan Ibu Hamil tentang Inisiasi Menyusu Dini di Praktek Bidan Mandiri Varia Mega Lestary Natar Lampung Selatan.

Metode: Penelitian dilakukan secara kuantitatif dengan menggunakan kuesioner yang disebarakan kepada responden.

Hasil : Hasil penelitian yang diperoleh dari 30 responden tentang Pengetahuan Ibu Hamil Trimester III Tentang Inisiasi Menyusui Dini Di Puskesmas Way Kandis Tahun 2024 didapatkan kesimpulan bahwa Pengetahuan Ibu Hamil Trimester III Tentang Inisiasi Menyusui Dini di Jalan Puskesmas Kandis tahun 2024 berpengetahuan dengan kategori baik sebanyak 0 responden, berpengetahuan cukup sebanyak 5 responden (16,7%), berpengetahuan kurang sebanyak 25 responden (83,3%).

Kesimpulan: Banyak faktor yang mempengaruhi pengetahuan ibu seperti usia ibu, tingkat pendidikan akhir, pekerjaan dan pengalaman ibu dalam hamil dan menyusui. Rendahnya pengetahuan pada responden penelitian ini juga dapat dipengaruhi oleh faktor internal, salah satunya berdasarkan fakta di lapangan bahwa sebagian besar ibu hamil mempunyai pendidikan terakhir SMA dan pendidikan tinggi diatas SMA sehingga dapat mempengaruhi pengetahuan dan pemahaman. dari informasi yang diperoleh.

Saran : Diharapkan ibu hamil dapat menambah pengetahuannya mengenai hal ini dengan mencari informasi tentang inisiasi menyusui dini seperti umur, pekerjaan, pendidikan, paritas.

Kata Kunci: Pengetahuan, IMD, ibu hamil.

ABSTRACT

Background: Low maternal knowledge about IMD, maternal education level, support from health workers and family, breastfeeding counseling that is not running well, delivery methods, and place of delivery are several factors that hinder the implementation of IMD (Sinaga & Siregar, 2020) (Novianti, Mujiati, 2019) (Swandy et al., 2019). The results of Lestariningsih's (2016) research in the delivery room found that not all patients received information from health workers about IMD before giving birth. The counseling given by health workers to inpartum patients is usually first looked at the condition of the mother who is about to give birth. If she is still cooperative then the first counseling given is about the birth process or pushing techniques (Lestariningsih, 2016). Damayanti's research (2016) found that the implementation of IMD was not optimal, still 60% was carried out by all midwives (Damayanti, 2016).

Objective: To determine the knowledge of pregnant women regarding early initiation of breastfeeding at the independent midwife practice Varia Mega Lestary Natar, South Lampung.

Method: The research was conducted quantitatively using a questionnaire distributed to respondents.

Results: The results of research obtained from 30 respondents regarding the knowledge of third trimester pregnant women regarding early initiation of breastfeeding at Way Kandis Community Health Center in 2024

concluded that 0 respondents had knowledge of third trimester pregnant women regarding early initiation of breastfeeding at Jalan Kandis Community Health Center in 2024. , 5 respondents (16.7%) had sufficient knowledge, 25 respondents (83.3%) had less knowledge.

Conclusion: Many factors influence maternal knowledge such as maternal age, final education level, occupation and maternal experience in pregnancy and breastfeeding. The low level of knowledge among respondents in this study can also be influenced by internal factors, one of which is based on facts in the field that the majority of pregnant women have a high school education or higher education above high school, which can influence knowledge and understanding. from the information obtained.

Suggestion: It is hoped that pregnant women can increase their knowledge regarding this matter by looking for information about early initiation of breastfeeding such as age, occupation, education, parity.

Keywords: Knowledge, IMD, pregnant women.

INTRODUCTION

Mother pregnant is a mother who is pregnant from conception to birth of the fetus (Prawirohardjo, 2017). Pregnancy is a physiological process that almost always occurs in every woman. Pregnancy occurs after the sperm and ovum meet, grow and develop in the uterus for 259 days or 37 weeks or up to 42 weeks (Nugroho et al, 2017). According to Atikah Proverawati (2009), the pregnancy period is divided into three trimesters, namely trimesters I, II and III. The first trimester of pregnancy is 0-12 weeks of gestation, at the beginning of pregnancy (first trimester) women often experience nausea and vomiting or what is often called morning sickness. Nausea and vomiting in early pregnancy are related to changes in hormonal levels in the pregnant woman's body. In the first trimester of pregnancy, there is usually a slight increase in body weight of around 1-2 kg. The second trimester of pregnancy is 13-27 weeks and the third trimester is 28-40 weeks, in the second and third trimesters there is ideal weight gain during pregnancy. 8 Pregnant women must have a normal body weight because this will affect the growth and development of the fetus. Pregnant women who experience malnutrition will cause miscarriage, premature birth, low birth weight, uterine disorders during childbirth, and bleeding after giving birth.

Early initiation of breastfeeding is giving a newborn baby the opportunity to breastfeed from its mother within the first hour after birth. Early initiation of breastfeeding is carried out immediately after giving birth until one hour after giving birth, placing the newborn baby on his stomach after drying his body but not cleaning him, and ensuring that the baby gets skin-to-skin contact with the mother, finds the nipple and gets the first colostrum or breast milk (ASI). go out. So early initiation of breastfeeding is a series of activities where as soon as a baby is born whose umbilical cord has been cut, he instinctively carries out activities that end with looking for the

mother's nipple and then breastfeeding in the first hour of birth (Roesli, 2018).

There are several interventions that may interfere with the baby's natural ability to search for and find the mother's breast. For example, chemical drugs given when a mother gives birth can reach the fetus, making it difficult for the baby to suckle at the mother's breast. Before carrying out this IMD procedure, it is highly recommended to create a calm, comfortable and patient atmosphere to give the baby the opportunity to crawl and look for the mother's breast (Sukrit, 2017). IMD is done by placing the baby on the mother's chest or stomach so that the baby's skin sticks to the mother's skin. IMD will increase the ability and strengthen the mother's desire to continue breastfeeding during infancy, give the baby the opportunity to get the first colostrum which is rich in immune substances, and also provide direct warmth to the baby's body, thereby reducing the incidence of stomach ulcers. death from cold.

RESEARCH METHODS

The type of research used in this research is quantitative. Quantitative research methods are a type of research whose specifications are systematic, planned and clearly structured from the start until the creation of the research design. Quantitative research methods as proposed by Sugiyono (2017) are research methods based on the philosophy of positivism, used to research certain populations or samples, collecting data using research instruments, quantitative/statistical data analysis, with the aim of testing a predetermined hypothesis.

RESEARCH RESULTS

Data collection in this research is primary data, data collection was carried out by filling out a questionnaire to get an overview of the knowledge of third trimester pregnant women regarding early

initiation of breastfeeding at the Way Kandis Community Health Center. Respondent characteristics consist of age, education, occupation, and number of parities.

Table 1
Characteristics of Respondents Based on Age

| Age | | |
|-----------|-----------|------------|
| Variables | Frequency | Percentage |
| At risk | 2 | 6.7% |
| No risk | 28 | 93.3% |

Based on the table above, it was obtained from 30 respondents who were not at risk (20-35 years) that there were 28 respondents (93.3%), while those who were at risk (<20 years – >35 years) were 2 respondents (6.7%).

Based on the table above, 2 respondents (6.6%) obtained from 30 respondents with high education, while 23 respondents had moderate education (76.7%), and 5 respondents with low education (16.7%).

Table 2
Characteristics of Respondents Based on Education

| Education | | |
|--------------------------------|-----------|------------|
| Variables | Frequency | Percentage |
| Elementary-Middle School (Low) | 5 | 16.7% |
| SMA-D3 (Medium) | 23 | 76.7% |
| S1 (High) | 2 | 6.6% |

Table 3
Characteristics of Respondents Based on Occupation

| Work | | |
|-------------|-----------|------------|
| Variables | Frequency | Percentage |
| Work | 2 | 6.7% |
| Not Working | 28 | 93.3% |

Based on the table above, it was found that of the 30 respondents, 2 respondents (6.7%) were working, while 28 respondents (93.3%) were not working.

Based on the table above, 7 respondents (23.3%) were obtained from 30 respondents based on primi gravida parity, while 17 respondents (56.7%) were multigravida, and 6 respondents (20%) were 0 parity.

Table 4
Characteristics of Respondents Based on Parity

| Parity | | |
|---------------|-----------|------------|
| Variables | Frequency | Percentage |
| Primi Gravida | 7 | 23.3% |
| Multi Gravida | 17 | 56.7% |
| Parity 0 | 6 | 20% |

Table 5
Results of Knowing Pregnant Women Trimester III about Early Breastfeeding Initiation at Way Kandis Health Center

| Variables | Frequency | Percentage |
|-----------|-----------|------------|
| Low | 25 | 83.3% |
| Enough | 5 | 16.7% |
| Good | 0 | 0 |

Based on the table above, 0 respondents had good knowledge, 5 respondents had good knowledge (16.7%), and 25 respondents had less knowledge (83.3%).

DISCUSSION

The results of research conducted in the Way Kandis Community Health Center area in May 2024 with a total of 30 third trimester pregnant women showed that the majority of respondents were aged 20-35 years. The majority of respondents in this study were aged 20-35 years. According to existing theory, age is one of the factors that can determine the health of pregnant women. At the age of <20 years, the female reproductive organs are immature and have a high risk of disrupting fetal development and at the age of 35 years there will be changes in the reproductive tissues and organs and the birth canal will no longer be flexible. At this age, other diseases tend to be found in the mother's body. Meanwhile, a good age for pregnant women is between 20-35 years. At this age, the female reproductive organs have developed and are functioning optimally (Prawirohardjo, 2016). From the research results of Ika Nopa (2019), it was found that there was no significant relationship between individual variables in the form of age, education and employment and patient motivation in carrying out IMD. This is in line with research on factors related to IMD practice where the variables age, work and education found no relationship between age and education variables and IMD practice (Mujur A. et al., 2014).

CONCLUSION

Based on the research results obtained from 30 respondents regarding the knowledge of third trimester pregnant women regarding early initiation of breastfeeding at the Way Kandis Community Health Center in 2024, it was concluded that the knowledge of third trimester pregnant women regarding early breastfeeding initiation at the Way Kandis Community Health Center in 2024 was in the good category with 0 respondents, 5 respondents (16.7%) had sufficient knowledge, 25 respondents (83.3%) had insufficient knowledge. Many factors influence maternal knowledge such as maternal age, final education level, occupation and maternal experience during pregnancy and breastfeeding. The low level of knowledge among respondents in this study can also be influenced by internal factors, one of which is based on facts in the field that the majority of pregnant women have a high school education or higher education above

high school, which can influence knowledge and understanding. from the information obtained.

SUGGESTION

It is hoped that pregnant women can increase their knowledge regarding this matter by seeking information about early initiation of breastfeeding such as age, occupation, education, parity.

This research can be used as a reference source for further research and can be upgraded to research with variables and variations.

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